

FINANCIAL AFFIDAVIT

IN UNITED STATES		<input type="checkbox"/> MAGISTRATE	X DISTRICT	<input type="checkbox"/> APPEALS COURT or	<input type="checkbox"/> OTHER PANEL (Specify below)	
IN THE CASE OF _____						
UNITED STATES V.S. _____		FOR _____		LOCATION NUMBER _____		
AT _____						
PERSON REPRESENTED (Show your full name) <i>Christina (aka) Reynaldo aka Fontanazza</i>						
CHARGE/OFFENSE (describe if applicable & check box →)		<input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor		DOCKET NUMBERS Magistrate 04-1916 CBS District Court Court of Appeals		
ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY						
EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed					
	Name and address of employer: _____					
	IF YES, how much do you earn per month? \$ _____			IF NO, give month and year of last employment How much did you earn per month? \$ _____		
	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
ASSETS	IF YES, how much does your Spouse earn per month? \$ _____			If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____		
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
	OTHER INCOME	RECEIVED			SOURCES	
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ _____					
PROP- ERTY	CASH Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____					
	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT			VALUE ?	DESCRIPTION <i>1993 Ward Award over 100,000.00</i>	
OBLIGATIONS & DEBTS	DEPENDENTS		MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input checked="" type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents <i>6</i>	List persons you actually support and your relationship to them <i>Diana (daughter) S.A.V. (son) Carmelita (niece) Patricia (niece) Levri (son) Becky (daughter) Natalie (daughter)</i>	
	{		APARTMENT OR HOME:	Creditors	Total Debt	Monthly Pmt.
	{ DEBTS & MONTHLY BILLS (LIST ALL OBLIGATIONS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)		_____	\$ _____	\$ _____	\$ _____
	{		_____	\$ _____	\$ _____	\$ _____
I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) <i>5/18/04</i>						
SIGNATURE OF DEFENDANT (OR PERSON REPRESENTED) <i>+ Julio E. Bernabe</i>						